



Elite Flight Academy
Student Pilot Scholarship 2024

This application packet is to acquire a flight training scholarship from Elite Flight Academy. Approximate cash value is \$16,000. This package will include:

- 50 Hours of flight time
- 20 Hours of Ground time
- 5 Hours of Simulator time
- Books, Training Materials, Headset, Charts

One student will be selected to receive this flight training package based on current academic status, financial need, and general learning demeanor.

The scholarship may not be exchanged for cash and must be redeemed before December 31, 2024. This scholarship is non-transferable. In addition, all training must be completed by December 31, 2025. The applicant must be between the ages of 16 through 18 as of June 1, 2024, having the full written permission of their parent or legal guardian. The scholarship recipient will be announced on December 15, 2024 on the Elite Flight Academy Facebook Page/Website.

Upon filling out the following information pages, the applicant must also submit a minimum one page (typed, single space) essay that answers the following questions:

- What are my life/career plans upon graduating high school?
- How can aviation change my life?
- How could my participation in aviation change someone else?
- Why do I deserve this scholarship?

**Completed applications must be scanned and emailed
to: info@eliteflightacademy.com before 9:00pm Friday Oct. 31, 2024**

EFA Student Pilot Scholarship Application

Biographical Information

Name: _____ Birth Date: ____/____/____

Home Phone: (____)____-____ Cell Phone: (____)____-____

Email: _____

Address: _____

School: _____

Grade: _____ GPA: _____

Name of Parent(s) or Legal Guardian: _____

Phone Number(s) of Parent/Legal Guardian Phone: (____)____-____

Address of Parent/Guardian (if different): _____

Email of Parent/Guardian: _____

Citizenship: _____

Sex (M/F): _____

Name of school counselor for independent verification of your school records:

Contact Email: _____

Contact Phone: _____

The information you provide will be kept confidential.

How would you describe yourself?

What was your parents' approximate combined income before taxes last year?

School Activities

Please list School Activities since Grade 9 including extracurricular functions:

Please list any Awards, Honors, Special Skills, or Talents (School or Non-school Related):

Please list Community Service Involvement since Grade 9:

Please list any Advanced Placement Courses/Dual Enrollment taken or currently taking since Grade 9:

Please list Employment History since Grade 9:

Elite Flight Academy

AGREEMENT TO WAIVE ALL CLAIMS, LIABILITY, ASSUME RISK, AND INDEMNIFY

I, the undersigned (the student/passenger – if under 18 then also the parent/legal guardian), have the authority to enter into this agreement, in exchange for being allowed to take part in this or any other flight/activity. I, the undersigned, agree to this contract as follows: AGREEMENT

TO WAIVE LIABILITY AND NOT TO SUE

I release and discharge Elite Flight Academy (hereafter referred to as "EFA"), Elite Flight Academy LLC and all the officers, directors, students, chapters, employees, agents, divisions, affiliates, and volunteers (including pilots, owners and operators of airplanes used during any event/flight) of each of those corporations ("EFA"), and any other persons or entities claimed or deemed to be liable from, and agree not to sue EFA for, any and all claims against EFA for, any injury or death arising from the participation in any flight/activity. This release, discharge and agreement not to sue applies to all legal rights, including those resulting from any negligence of EFA, other than those resulting from the gross negligence or willful misconduct of EFA.

ASSUMPTION OF RISK

I understand that flying in airplanes and being around airplanes involves risks. Serious injury or death can result from many causes, including but not limited to airplane crashes, falls, pilot error, ground crew error, engine or mechanical failure, negligent maintenance, defects in runways, interference by birds and other objects, weather conditions, contaminated fuel, or hard or forced landings. Injuries could include, but are not limited to, minor injuries such as bruises, scratches and sprains; major such as eye injuries, broken bones and concussions; or catastrophic such as paralysis, severe burns, or death. I assume all risks and full responsibility for any injury or death arising from taking part in any activity/flight.

INDEMNIFICATION

I agree to indemnify and hold EFA harmless from any claims, costs, damages, and liabilities, including attorney's fees, arising from taking part in any flight/activity. This duty to indemnify and hold EFA harmless applies even if EFA is negligent and even if the negligence of EFA is as the sole proximate cause: however, indemnification of EFA is not required if EFA is grossly negligent or has engaged in willful misconduct.

Authorization of pictures and name

I agree to grant EFA permission to use photographs, videos, and name in any web-based publications, print or digital advertisements, organization bulletins, and all social media platforms. I understand and agree that photographs in the possession of EFA shall become the property of EFA and I hereby waive my right to inspect or approve of any photographs or videos by which my likeness appears.

LEGAL ADVICE

I know that I can talk to my legal advisor about this Agreement and I have either done so or chosen not to. I understand that I have the right and have been given the opportunity to object to the provisions of this Agreement. I am voluntarily signing this Agreement and intend it to be the perpetual, unconditional release of all liability to the greatest extent allowed by law. Before signing, carefully read this entire agreement. Note from EFA: If an accident were to occur, you would be giving up legal rights and incurring legal liabilities. If any part of this Agreement is held invalid, the rest of the provisions shall remain in effect. If you do not understand anything in this Agreement, you should not sign it and you should talk to your legal advisor.

Legal Address of Participant:

Phone Number: (_____) _____ - _____

I have read and completely understand the Agreement and Waiver as listed on the preceding page of this document: (Circle One) YES NO

Signature of Parent/ Legal Guardian (If under 18)

Printed Name of Parent/ Legal Guardian (If under 18)

Signature of Student/Passenger

Printed Name of Student/Passenger

Notary

State of _____ County of _____ The signatures above was acknowledged before me on this _____ day of _____, 20_____.
by _____ Notary Public.
My Commission Expires _____